

ENCLOSURE A

GENERAL GUIDANCE

1. Deployment Defined. For the purpose of joint health surveillance, a deployment is defined as a troop movement resulting from a JCS/unified command deployment order for 30 continuous days or greater to a land-based location outside the United States that does not have a permanent US military medical treatment facility (i.e., funded by the Defense Health Program). Routine shipboard operations that are not anticipated to involve field operations ashore for over 30 continuous days are exempt from the requirements for pre- and post-deployment health assessments.

a. Weekly DNBI reporting is strongly encouraged on a routine basis, whether in garrison or deployed, to facilitate a seamless transition to joint operations.

b. If the duration of deployment is uncertain, then the surveillance requirements described in this enclosure (pre- and post-deployment health assessments, health readiness, and DNBI reporting) will be adhered to.

c. The baseline surveillance requirements described in this enclosure should be augmented as necessary based upon health threat assessments.

2. Pre-deployment. The unified command, through deployment orders and/or separate instructions, will require the Services and supporting CINCs to accomplish the following at the home station or processing station of the deploying Service member:

a. Health Threat/Countermeasures. Inform Service members on all known potential health threats, to include endemic diseases; injuries; nuclear, biological, or chemical (NBC) contaminants; toxic industrial compounds; combat and deployment-related stress; climatic extremes; and other environmental health threats (such as use of non-approved pesticides). Proven preventive medicine countermeasures will be employed, to include appropriate personal protective measures and use of personal protective equipment.

b. Health Readiness. Complete individual health readiness processing, including the following:

(1) Immunizations

(a) DOD Minimum Requirements. Must be current in tetanus-diphtheria, influenza, hepatitis A, MR/MMR, and polio.

(b) Service-specific Requirements. Refer to AFJI 48-110, AR 40-562, BUMEDINST 6230.15, and CG COMDTINST M6230.4E, "Immunizations and Chemoprophylaxis," 1 November 1995 (examples include yellow fever, hepatitis B, typhoid, and plague).

(c) Deployment-specific Requirements. Based upon the geographical location, the unified command will determine additional immunizations, chemoprophylactic medications, and other individual personal protective measures (such as insect repellent, bednetting, and uniform impregnation).

(2) Medical Record. Update the Service-specific medical record with:

(a) Blood type.

(b) Medication/allergies.

(c) Special duty qualifications.

(d) Immunization record.

(e) Pre-deployment health assessment form.

(f) Summary sheet of past medical problems.

(3) HIV within previous 12 months (serves dual purpose: HIV screening and predeployment serum sample).

(4) Tuberculosis skin test within 24 months. For previous PPD converters, handle IAW Service policy.

(5) DNA sample on file. To confirm the unit/individual status of DNA specimens on file, contact the DOD DNA Specimen Repository (voice 301-295-4379, fax 301-295-4380, or e-mail afrssir@afip.osd.mil).

(6) Current physical exam or assessment IAW Service policy.

(7) Dental Class I/II.

(8) 90-day supply of prescription medications.

(9) Required medical equipment (glasses, gas mask inserts, hearing aids, dental orthodontic equipment, etc.).

(10) Personal occupational health equipment (respiratory protection, hearing protection, and personal exposure dosimeters).

(11) No unresolved health problems (P-4 profile, limited duty status, pregnancy).

c. Health Assessment. Conduct predeployment health assessments using the form and processing instructions at Enclosure B.

3. During Deployment. The unified command will provide guidance and support to:

a. Ensure DNBI surveillance data is collected and analyzed using the form and instructions at Enclosure C.

b. Establish procedures for documenting and reporting those reportable medical events listed at Enclosure D. Refer to the US Army Medical Surveillance Activity (AMSA) publication, "Tri-Service Reportable Events," version 1.0, July 1998, for guidelines and case definitions. Report on presumptive as well as confirmed reportable medical events.

c. Ensure Service-specific procedures are maintained for appropriate archiving of health documents (DNBI, pesticides, and environmental surveillance data) and records (individual health treatment provided).

d. Provide troop commanders with appropriate and timely health status information.

e. Based upon the threat assessment and guidance provided in the Services joint implementation instructions to DODI 6490.3, "Implementation and Application of Joint Medical Surveillance for Deployments," conduct a systematic and comprehensive program of surveillance, assessment, and prevention of occupational and environmental health hazards.

f. Ensure the integrity of occupational health and safety programs.

g. Conduct pest control operations using the integrated pest management (IPM) program described in DODI 4150.7, "DOD Pest Management Program," 22 April 1996. When pesticides are employed ensure the use of only DOD approved pesticides.

4. Post-Deployment.

a. The unified command will provide guidance and support to:

(1) Conduct post-deployment health assessments using the form and processing guidance at Enclosure E.

(2) Identify Service members in need of medical evaluation upon return to home/processing station based on review of medical treatment received in theater, the post-deployment health assessment form, and other pertinent health surveillance data.

(3) Conduct medical debrief to deployed Service members on all significant health events and exposures.

(4) Document environmental exposures in after action reports (AARs).

(5) Develop and forward health lessons learned to the Joint Uniform Lessons Learned System (JULLS).

b. The Services and supporting CINCs are requested to accomplish the following at the home station or processing station of the redeploying Service member:

(1) Conduct tuberculosis screening within 1 year of redeployment or sooner IAW Service-specific requirements.

(2) Collect, when indicated by Service policy, a serum sample for HIV testing and storage in the serum repository.

(3) Conduct additional health assessments and/or health debriefs if indicated by health threats or events occurring in theater.